

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000094756

Entity Name: TAMPA HEALTHY AGING, INC.

Current Principal Place of Business:

15417 NORTH DALE MABRY HIGHWAY
TAMPA, FL 33818

Current Mailing Address:

15417 NORTH DALE MABRY HIGHWAY
TAMPA, FL 33818 US

FEI Number: 46-4210477

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROBERT C. BURNETTE, P.A.
5537 GALL BOULEVARD
ZEPHYRHILLS, FL 33542 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P	Title	VP
Name	GRANELL, ANTHONY	Name	GRANELL, VICKI
Address	5436 LAKE LECLARE RD.	Address	5436 LAKE LECLARE RD.
City-State-Zip:	LUTZ FL 33558	City-State-Zip:	LUTZ FL 33558

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANTHONY GRANELL

PRESIDENT

01/21/2015

Electronic Signature of Signing Officer/Director Detail

Date